

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

0/73-254

CLAIMS

	AS FILED		AFTER TRY ADJUSTMENT		AFTER NEW ADJUSTMENT								
	NO	DEP	NO	DEP	NO	DEP		NO	DEP	NO	DEP	NO	DEP
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													
32													
33													
34													
35													
36													
37													
38													
39													
40													
41													
42													
43													
44													
45													
46													
47													
48													
49													
50													
51													
52													
53													
54													
55													
56													
57													
58													
59													
60													
61													
62													
63													
64													
65													
66													
67													
68													
69													
70													
71													
72													
73													
74													
75													
76													
77													
78													
79													
80													
81													
82													
83													
84													
85													
86													
87													
88													
89													
90													
91													
92													
93													
94													
95													
96													
97													
98													
99													
100													
TOTAL NO.	3		3										
TOTAL NO.	3		3										
TOTAL CLAIMS	3		16										
TOTAL NO.													
TOTAL NO.													
TOTAL CLAIMS													